

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>10/05/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>59</i>	<i>1018</i>
FORMALITY REVIEW	<i>BZ</i>	<i>897</i>	<i>11-08-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>8/5</i>
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS 897

*yc*  
*11/9/00*  
*yc*  
*11/10/00*